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FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1	ORGANIZATION (See instructions)	
1. NAME OF COMMITTEE (in	(Check if name Example: If typying, type	Office use only  12FE4M5
Ameren Feder	al Political Action Committee (AmerenFED PAC)	
ADDRESS (number and	1331 Pennsylvania Ave., NW	
(Check if address is changed)	Suite 550S  Washington	DC 20004 -
	CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MA (Check if address is changed)	L ADDRESS (Please provide only one e-mail address)  sgarrison@ameren.com  L	
COMMITTEE'S WEB	PAGE ADDRESS (URL)	
(Check if address is changed)		
2. DATE 0.3	27 2009	7
<ul><li>3. FEC IDENTIFICA</li><li>4. IS THIS STATEM</li></ul>	0 0000000	
Type or Print Name of		M M / D D / Y Y Y Y
Signature of Treasurer	Electronically Filed by Mr. Jeff Vance	Date 0.3 27 2009
NOTE: Submission of fa	se, erroneous, or incomplete information may subject the person signing this State ANY CHANGE IN INFORMATION SHOULD BE REPORTED V	
Office Use Only	For further information of Federal Election Commiss Toll Free 800-424-9530	